

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Northern District of Texas, Dallas Division

Case number (if known): Chapter 11

☐ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/19

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Lighthouse Rescue Mission

2. All other names debtor used in the last 8 years

Include any assumed names, trade names, and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 7 5 - 2 9 6 4 8 4 6

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

402 E. Church
Number Street

Number Street

Grand Prairie, TX 75050
City State ZIP Code

P.O. Box

City State ZIP Code

Dallas
County

Location of principal assets, if different from principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL)

6. Type of debtor
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify:

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply:

- ☒ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes> .

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☐ Chapter 9
☒ Chapter 11. **Check all that apply:**
☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).
☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☐ No
☒ Yes. District Northern District of Texas When 6/30/2014 Case number 14-42630
MM / DD / YYYY
District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
☐ Yes. Debtor _____ Relationship _____
District _____ When _____
MM / DD / YYYY
Case number, if known _____

List all cases. If more than 1, attach a separate list.

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

- ☐ It needs to be physically secured or protected from the weather.

- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

- ☐ Other _____

Where is the property?

Number Street

City

State

ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds?

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- ☒ 1-49 ☐ 50-99 ☐ 1,000-5,000 ☐ 25,001-50,000
☐ 100-199 ☐ 200-999 ☐ 5,001-10,000 ☐ 50,000-100,000
☐ 10,001-25,000 ☐ More than 100,000

15. Estimated assets

- ☐ \$0-\$50,000 ☐ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
☒ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

16. Estimated liabilities

- | | | |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- ☐ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- ☐ I have been authorized to file this petition on behalf of the debtor.
- ☐ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/05/2019
MM/ DD/ YYYY

X

/s/ Lucretia Crittendon
Signature of authorized representative of debtor

Lucretia Crittendon
Printed name

Title Vice-President

18. Signature of attorney

X

/s/ Sarah Melissa Cox
Signature of attorney for debtor

Date 08/05/2019
MM/ DD/ YYYY

Sarah Melissa Cox
Printed name

Law Office of Sarah M. Cox, PLLC
Firm name

12770 Coit Road
Number Street

Dallas TX 75251
City State ZIP Code

(214) 310-1321 sarah@sarahcoxlaw.com
Contact phone Email address

245475 CA
Bar number State

Fill in this information to identify the case:

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Debtor name Lighthouse Rescue Mission

United States Bankruptcy Court for the:

Northern District of Texas, Dallas Division

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property****12/15**

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**☐ No. Go to Part 2.☒ Yes. Fill in the information below.**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand**

3. Checking, savings, money market, or financial brokerage accounts *(Identify all)*

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1 Wells FargoChecking account4183\$2,000.00**4. Other cash equivalents** *(Identify all)*

Name of institution (bank or brokerage firm)

None**5. Total of Part 1**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$2,000.00**Part 2: Deposits and prepayments**

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes. Fill in the information below.

Current value of
debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

None

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

None

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.
☐ Yes. Fill in the information below.

Current value of debtor's
interest

11. Accounts Receivable

| | | | | | | |
|---------------------------|---------------|---|------------------------------------|---|---------|---------------|
| 11a. 90 days old or less: | <u>\$0.00</u> | - | <u>\$0.00</u> | = | → | <u>\$0.00</u> |
| | face amount | | doubtful or uncollectible accounts | | | |
| 11b. Over 90 days old: | <u>\$0.00</u> | - | <u>\$0.00</u> | = | → | <u>\$0.00</u> |
| | face amount | | doubtful or uncollectible accounts | | | |

12. **Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes. Fill in the information below.

| | Valuation method used for current value | Current value of debtor's interest |
|--|--|---------------------------------------|
|--|--|---------------------------------------|

14. **Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

None

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or join venture**

| Name of entity: | % of ownership: |
|-----------------|-----------------|
|-----------------|-----------------|

None

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

None

17. **Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes. Fill in the information below.

| General description | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|-------------------------------------|---|---|------------------------------------|
| 19. Raw materials | | | | |
| 20. Work in progress | | | | |
| 21. Finished goods, including goods held for resale | | | | |
| 22. Other inventory or supplies | | | | |
| 23. Total of Part 5 | | | | |
| Add lines 19 through 22. Copy the total to line 84. | | | | |
| 24. Is any of the property listed in Part 5 perishable? | | | | |
| <input checked="" type="checkbox"/> No | | | | |
| <input type="checkbox"/> Yes | | | | |
| 25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed? | | | | |
| <input checked="" type="checkbox"/> No | | | | |
| <input type="checkbox"/> Yes | | | | |
| 26. Has any of the property listed in Part 5 been appraised by a professional within the last year? | | | | |
| <input checked="" type="checkbox"/> No | | | | |
| <input type="checkbox"/> Yes | | | | |

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.

☐ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|---|---|------------------------------------|
| 28. Crops—either planted or harvested | | | |
| None | | | |
| 29. Farm animals Examples: Livestock, poultry, farm-raised fish | | | |
| None | | | |
| 30. Farm machinery and equipment (Other than titled motor vehicles) | | | |
| None | | | |
| 31. Farm and fishing supplies, chemicals, and feed | | | |
| None | | | |
| 32. Other farming and fishing-related property not already listed in Part 6 | | | |
| None | | | |
| 33. Total of Part 6 | | | |
| Add lines 28 through 32. Copy the total to line 85. | | | |

Lighthouse Rescue Mission
Name

34. Is the debtor a member of an agricultural cooperative?
- ☒ No
- ☐ Yes. Is any of the debtor's property stored at the cooperative?
- ☐ No
- ☐ Yes
35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?
- ☒ No
- ☐ Yes
36. Is a depreciation schedule available for any of the property listed in Part 6?
- ☒ No
- ☐ Yes
37. Has any of the property listed in Part 6 been appraised by a professional within the last year?
- ☒ No
- ☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
- ☒ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 39. Office furniture | | | |
| Office furniture | | | \$500.00 |
| Piano | | | \$300.00 |
| Daycare furniture | | | \$500.00 |
| 40. Office fixtures | | | |
| Fixtures and Equipment | | | \$5,000.00 |
| 41. Office equipment, including all computer equipment and communication systems equipment and software | | | |
| Computers | | | \$1,000.00 |
| 42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles | | | |
| None | | | |
| 43. Total of Part 7 | | | |
| Add lines 39 through 42. Copy the total to line 86. | | | \$7,300.00 |
| 44. Is a depreciation schedule available for any of the property listed in Part 7? | | | |
| <input checked="" type="checkbox"/> No | | | |
| <input type="checkbox"/> Yes | | | |
| 45. Has any of the property listed in Part 7 been appraised by a professional within the last year? | | | |
| <input checked="" type="checkbox"/> No | | | |
| <input type="checkbox"/> Yes | | | |

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

General description

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

Net book value of debtor's interest (Where available)

Valuation method used for current value

Current value of debtor's interest

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

None

48. Watercraft, trailers, motors, and related accesories Examples: Boats trailers, motors, floating homes, personal watercraft, and fishing vesels

None

49. Aircraft and accesories

None

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

None

51. Total of Part 8

Add lines 47 through 50. Copy the total to line 87.

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real Property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has interest

Name

| Description and location of property | Nature and extent of debtor's interest in property | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|---|------------------------------------|
| Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment, or office building), if available. | | | | |

55.1 402 E. Church Street Fee Simple \$300,000.00

56. **Total of Part 9**
Add the current value on lines 55.1 through 55.6 and entries from any addition sheets. Copy the total to line 88.

\$300,000.00

57. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 10: Intangibles and Intellectual Property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☒ No. Go to Part 11.
☐ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---------------------|---|---|------------------------------------|
| | | | |

60. **Patents, copyrights, trademarks, and trade secrets**
None

61. **Internet domain names and websites**
None

62. **Licenses, franchises, and royalties**
None

63. **Customer lists, mailing lists, or other compilations**
None

64. **Other intangibles, or intellectual property**
None

65. **Goodwill**
None

66. **Total of Part 10**
Add lines 60 through 65. Copy the total to line 89.

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107)?

☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?
- ☒ No
- ☐ Yes
69. Has any of the property listed in Part 10 been appraised by a professional within the last year?
- ☒ No
- ☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

- ☒ No. Go to Part 12.
- ☐ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

None

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

None

73. Interests in insurance policies or annuities

None

74. Causes of action against third parties (whether or not a lawsuit has been filed)

None

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

None

76. Trusts, equitable or future interests in property

None

77. Other property of any kind not already listed *Examples:* Season tickets, country club membership

None

78. Total of Part 11

Add lines 71 through 77. Copy the total to line 90.

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

| Type of property | Current value of personal property | Current value of real property |
|--|------------------------------------|--------------------------------|
| 80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1. | \$2,000.00 | |
| 81. Deposits and prepayments. Copy line 9, Part 2. | | |
| 82. Accounts receivable. Copy line 12, Part 3. | | |
| 83. Investments. Copy line 17, Part 4. | | |
| 84. Inventory. Copy line 23, Part 5. | | |
| 85. Farming and fishing-related assets. Copy line 33, Part 6. | | |
| 86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7. | \$7,300.00 | |
| 87. Machinery, equipment, and vehicles. Copy line 51, Part 8. | | |
| 88. Real property. Copy line 56, Part 9..... → | | \$300,000.00 |
| 89. Intangibles and intellectual property. Copy line 66, Part 10. | | |
| 90. All other assets. Copy line 78, Part 11. + | | |
| 91. Total. Add lines 80 through 90 for each column... 91a. | \$9,300.00 | \$300,000.00 + 91b. |
| 92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. | | \$309,300.00 |

Fill in this information to identify the case:

Debtor name Lighthouse Rescue Mission

United States Bankruptcy Court for the:

Northern District of Texas, Dallas Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A

Amount of claim
Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

2.1 Creditor's name

States Resources Corp.

Creditor's mailing address

2211 S. 156th Circle

Omaha, NE 68130

Creditor's email address, if known

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?

☒ No.

☐ Yes. Specify each creditor, including this creditor, and its relative priority.

Describe debtor's property that is subject to a lien

402 E. Church Street

402 E. Church St Grand Prairie, TX 75050

Describe the lien

Mortgage

Is the creditor an insider or related party?

☒ No

☐ Yes.

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

\$187,000.00

\$300,000.00

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$187,000.00

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

| Name and address | On which line in Part 1 did you enter the related creditor? | Last 4 digits of account number for this entity |
|--|---|---|
| <u>Palmer Manuel</u> | Line <u>2.1</u> | <u>5</u> <u>4</u> <u>9</u> <u>8</u> |
| <u>Campbell Centre I</u> | | |
| <u>8350 N. Central Expressway 1111</u> | | |
| <u>Dallas, TX 75206</u> | | |

Fill in this information to identify the case:

Debtor name Lighthouse Rescue Mission

United States Bankruptcy Court for the:

Northern District of Texas, Dallas Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

Dallas County Tax Assessor

Attn John R Ames

1201 Elm St 2600

Dallas, TX 75270

Date or dates debt was incurred

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the Claim:

Property Taxes

Is the claim subject to offset?

☒ No

☐ Yes

Total claim

unknown

Priority amount

unknown

2.2 Priority creditor's name and mailing address

Erwin, Danyelle

2801 Oak Rd Apt 5206

Arlington, TX 76010

Date or dates debt was incurred

08/02/2019

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the Claim:

Unpaid wages

Is the claim subject to offset?

☒ No

☐ Yes

\$1,200.00

\$1,200.00

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

Part 1: Additional Page

| | |
|--|---|
| <p>2.3 Priority creditor's name and mailing address</p> <p><u>Green, Beverly</u></p> <p><u>3132 Morning Meadow Lane</u></p> <p><u>Grand Prairie, TX 75052</u></p> <p>Date or dates debt was incurred <u>08/02/2019</u></p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(4)</u></p> | <p>As of the petition filing date, the claim is: <u>\$1,200.00</u> <u>\$1,200.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the Claim: <u>Unpaid wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> |
| <p>2.4 Priority creditor's name and mailing address</p> <p><u>Green, Mae Elizabeth</u></p> <p><u>509 Gilbert Rd</u></p> <p><u>Irving, TX 75061</u></p> <p>Date or dates debt was incurred <u>08/02/2019</u></p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(4)</u></p> | <p>As of the petition filing date, the claim is: <u>\$600.00</u> <u>\$600.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the Claim: <u>Unpaid wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> |
| <p>2.5 Priority creditor's name and mailing address</p> <p><u>Internal Revenue Service</u></p> <p><u>Centralized Insolvency Operations</u></p> <p><u>PO Box 7346</u></p> <p><u>Philadelphia, PA 19114</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(8)</u></p> | <p>As of the petition filing date, the claim is: <u>\$22,000.00</u> <u>\$22,000.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the Claim: <u>Payroll taxes</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> |

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

Part 1: Additional Page

2.6 Priority creditor's name and mailing address
Moore, LouKesha
6424 Melinda Dr
Fort Worth, TX 76119

Date or dates debt was incurred
08/02/2019

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)

As of the petition filing date, the claim is:

\$600.00

\$600.00

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the Claim:

Unpaid wages

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

| | | | Amount of claim |
|------------|--|--|-----------------|
| 3.1 | Nonpriority creditor's name and mailing address <u>Atmos Energy</u> <u>PO Box 790311</u> <u>Saint Louis, MO 63179</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$701.35</u> |
| 3.2 | Nonpriority creditor's name and mailing address <u>ATT</u> <u>c/o Bankruptcy</u> <u>4331 Communications Dr Flr 4W</u> <u>Dallas, TX 75211</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$421.16</u> |
| 3.3 | Nonpriority creditor's name and mailing address <u>City of Grand Prairie Water Utilities</u> <u>PO Box 534045</u> <u>Grand Prairie, TX 75053</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$353.10</u> |
| 3.4 | Nonpriority creditor's name and mailing address <u>TXU Energy</u> <u>6555 Sierra Dr,</u> <u>Irving, TX 75039</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$979.56</u> |
| 3.5 | Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | _____ |

Debtor Lighthouse Rescue Mission Case number (if known) _____

Name

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

| | | | |
|---|-----|------------------------|-------------------------------|
| | | Total of claim amounts | |
| 5a. Total claims from Part 1 | 5a. | | <u>\$25,600.00</u> |
| 5b. Total claims from Part 2 | 5b. | + | <u>\$2,455.17</u> |
| 5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c. | 5c. | | <div><u>\$28,055.17</u></div> |

Fill in this information to identify the case:

Debtor name Lighthouse Rescue Mission

United States Bankruptcy Court for the:
Northern District of Texas, Dallas Division

Case number (if known): _____ Chapter 11

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest Construction/remodeling
Contract to be ASSUMED

State the term remaining 0 months

List the contract number of any government contract _____

GreCo Remodeling
1422 Beckway Dr
Arlington, TX 76018

2.2 State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____

2.5 State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____

Fill in this information to identify the case:

Debtor name Lighthouse Rescue Mission

United States Bankruptcy Court for the:
Northern District of Texas, Dallas Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 Green, Lonnie

1805 Druid Ln
Street

Fort Worth, TX 76112

City

State

ZIP Code

States Resources Corp.

☒ D

☐ E/F

☐ G

2.2 Green, Mae Elizabeth

509 Gilbert Rd
Street

Irving, TX 75061

City

State

ZIP Code

States Resources Corp.

☒ D

☐ E/F

☐ G

2.3 Green, Timothy

509 Gilbert Rd
Street

Irving, TX 75061

City

State

ZIP Code

States Resources Corp.

☒ D

☐ E/F

☐ G

2.4 _____

Street

City

State

ZIP Code

2.5 _____

Street

City

State

ZIP Code

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

*Check all schedules
that apply:*

2.6

Street

City

State

ZIP Code

Fill in this information to identify the case:

Debtor name Lighthouse Rescue Mission

United States Bankruptcy Court for the:

Northern District of Texas, Dallas Division

Case number (if known): _____ Chapter 11

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real Property:**

Copy line 88 from *Schedule A/B*.....

\$300,000.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*.....

\$9,300.00

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*.....

\$309,300.00

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

\$187,000.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

\$25,600.00

3b. **Total amount of claims of non-priority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ \$2,455.17

4. **Total liabilities**.....

Lines 2 + 3a + 3b

\$215,055.17

Fill in this information to identify the case:

Debtor name Lighthouse Rescue Mission

United States Bankruptcy Court for the:

Northern District of Texas, Dallas Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue

Check all that apply

Gross revenue

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2019 to Filing date
MM/ DD/ YYYY

☒ Operating a business

☐ Other _____

\$46,700.00

For prior year:

From 01/01/2018 to 12/31/2018
MM/ DD/ YYYY MM/ DD/ YYYY

☒ Operating a business

☐ Other _____

\$86,000.00

For the year before that:

From 01/01/2017 to 12/31/2017
MM/ DD/ YYYY MM/ DD/ YYYY

☒ Operating a business

☐ Other _____

\$82,000.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Description of sources of revenue

Gross revenue from each source

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2019 to Filing date
MM/ DD/ YYYY

For prior year:

From 01/01/2018 to 12/31/2018
MM/ DD/ YYYY MM/ DD/ YYYY

For the year before that:

From 01/01/2017 to 12/31/2017
MM/ DD/ YYYY MM/ DD/ YYYY

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None

| Creditor's name and address | Dates | Total amount or value | Reasons for payment or transfer <i>Check all that apply</i> |
|--|-------|-----------------------|---|
| 3.1. _____ Creditor's name _____ Street _____ City State ZIP Code | | | <input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____ |

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None

| Insider's name and address | Dates | Total amount or value | Reasons for payment or transfer |
|--|-------|-----------------------|---------------------------------|
| 4.1. _____ Creditor's name _____ Street _____ City State ZIP Code Relationship to debtor | | | |

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

| Creditor's name and address | Description of the property | Date | Value of property |
|--|-----------------------------|------|-------------------|
| 5.1. _____ Creditor's name _____ Street _____ City State ZIP Code | | | |

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

| Creditor's name and address | Description of the action creditor took | Date action was taken | Amount |
|---|---|-----------------------|--------|
| 5.1. _____ Creditor's name _____ Street _____ _____ City State ZIP Code | XXXX- _____ | | |

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity —within 1 year before filing this case.

☒ None

| Case title | Nature of case | Court or agency's name and address | Status of case |
|--------------------------------------|----------------|--|--|
| 7.1. _____ | _____ | _____ Name _____ Street _____ City State ZIP Code | <input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| _____ Case number _____ | | | |

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

| Custodian's name and address | Description of the property | Value |
|---|---|--|
| 8.1. _____ Custodian's name _____ Street _____ City State ZIP Code | _____ Case title _____ Case number _____ Date of order or assignment _____ | _____ Court name and address _____ Name _____ Street _____ City State ZIP Code |

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

| 9.1. | Recipient's name and address | Description of the gifts or contributions | Dates given | Value |
|------|--|---|-------------|-------|
| | <p>Recipient's name</p> <p>Street</p> <p>City State ZIP Code</p> <p>Recipient's relationship to debtor</p> | | | |

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

| Description of the property lost and how the loss occurred | Amount of payments received for the loss | Date of loss | Value of property lost |
|--|---|--------------|------------------------|
| | <p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).</p> | | |

10.1. _____

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

| 11.1. | Who was paid or who received the transfer? | If not money, describe any property transferred | Dates | Total amount or value |
|-------|--|---|------------|-----------------------|
| | Law Office of Sarah M. Cox, PLLC | Attorney's Fee | 8/5/2019 | \$6,500.00 |
| | | Attorney's Fee | 07/29/2019 | \$2,000.00 |
| | Address | Attorney's Fee | 07/17/2019 | \$500.00 |
| | 12770 Coit Road 1100 | Attorney's Fee | 07/15/2019 | \$1,000.00 |
| | Street | | | |
| | Dallas, TX 75251 | | | |
| | City State ZIP Code | | | |
| | Email or website address | | | |
| | Who made the payment, if not debtor? | | | |
| | Beverly Green, Lucinda Crittendon | | | |

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None

| 12.1. | Name of trust or device | Describe any property transferred | Dates transfers were made | Total amount or value |
|-------|-------------------------|-----------------------------------|---------------------------|-----------------------|
| | Trustee | | | |

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

| 13.1. | Who received the transfer? | Description of property transferred or payments received or debts paid in exchange | Date transfer was made | Total amount or value |
|-------|----------------------------|--|------------------------|-----------------------|
| | Address | | | |
| | Street | | | |
| | City State ZIP Code | | | |
| | Relationship to debtor | | | |

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

| 14.1. | Address | Dates of occupancy |
|-------|---------------------|---------------------|
| | Street | From _____ To _____ |
| | City State ZIP Code | |

Part 8: Health Care Bankruptcies

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
—diagnosing or treating injury, deformity, or disease, or
—providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

| Facility name and address | Nature of the business operation, including type of services the debtor provides | If debtor provides meals and housing, number of patients in debtor's care |
|------------------------------|---|---|
| 15.1. _____ Facility name | _____ | _____ |
| _____ | Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. | How are records kept? |
| Street | | |
| _____ | | |
| City State ZIP Code | _____ | Check all that apply: |
| | _____ | <input type="checkbox"/> Electronically |
| | _____ | <input type="checkbox"/> Paper |

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

☒ No.

☐ Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

☐ No

☐ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?

☒ No. Go to Part 10.

☐ Yes. Does the debtor serve as plan administrator?

☐ No. Go to Part 10.

☐ Yes. Fill in below:

| Name of plan | Employer identification number of the plan |
|-------------------------------|--|
| _____ | EIN: ____ - ____ - ____ |
| Has the plan been terminated? | |
| <input type="checkbox"/> No | |
| <input type="checkbox"/> Yes | |

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

| Financial institution name and address | Last 4 digits of account number | Type of account | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|---|---------------------------------|--|--|---|
| 18.1 _____ Name _____ Street _____ City State ZIP Code | XXXX- ____ _ | <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other | _____ | _____ |

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

| Depository institution name and address | Names of anyone with access to it | Description of the contents | Does debtor still have it? |
|---|---|---|---|
| 19.1 _____ Name _____ Street _____ City State ZIP Code | _____ _____ _____ Address _____ _____ City State ZIP Code | _____ _____ _____ _____ _____ _____ City State ZIP Code | <input type="checkbox"/> No <input type="checkbox"/> Yes |

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

| Facility name and address | Names of anyone with access to it | Description of the contents | Does debtor still have it? |
|---|---|---|---|
| 20.1 _____ Name _____ Street _____ City State ZIP Code | _____ _____ _____ Address _____ _____ City State ZIP Code | _____ _____ _____ _____ _____ _____ City State ZIP Code | <input type="checkbox"/> No <input type="checkbox"/> Yes |

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

| Owner's name and address | Location of the property | Description of the property | Value |
|--------------------------|--------------------------|-----------------------------|-------|
| Name | | | |
| Street | | | |
| City State ZIP Code | | | |

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?

Include settlements and orders.

- ☒ No
☐ Yes. Provide details below.

| Case title | Court or agency name and address | Nature of the case | Status of case |
|-------------|----------------------------------|--------------------|------------------------------------|
| | Name | | <input type="checkbox"/> Pending |
| Case number | Street | | <input type="checkbox"/> On appeal |
| | City State ZIP Code | | <input type="checkbox"/> Concluded |

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Provide details below.

| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice |
|-----------------------|------------------------------------|-----------------------------|----------------|
| Name | Name | | |
| Street | Street | | |
| City State ZIP Code | City State ZIP Code | | |

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice |
|---------------------------------------|---------------------------------------|-----------------------------|----------------|
| Name _____ | Name _____ | _____ | _____ |
| Street _____ | Street _____ | _____ | |
| _____ | _____ | | |
| City _____ State _____ ZIP Code _____ | City _____ State _____ ZIP Code _____ | | |

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

| Business name and address | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. |
|--|-------------------------------------|--|
| 25.1. _____ Name _____ Street _____ _____ | _____ | EIN: _____ Dates business existed From _____ To _____ |
| City _____ State _____ ZIP Code _____ | | |

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☒ None

| Name and address | Dates of service |
|---|---------------------|
| 26a.1. _____ Name _____ Street _____ _____ | From _____ To _____ |
| City _____ State _____ ZIP Code _____ | |

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

Name and address

Dates of service

26b.1. _____ From _____ To _____
Name

Street

City State ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address

If any books of account and records are unavailable, explain why

26c.1. _____
Name

Street

City State ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1. States Resources Corp.
Name
2211 S. 156th Circle
Street

Omaha, NE 68130
City State ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

Case number (if known) _____

27.1.

ZIP Code

0.00%

To _____

30.1.

ZIP Code

page 11

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No

☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No

☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/05/2019
MM/ DD/ YYYY

X

/s/ Lucretia Crittendon
Signature of individual signing on behalf of the debtor

Position or relationship to debtor
Vice-President

Printed name Lucretia Crittendon

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

Fill in this information to identify the case:

Debtor name Lighthouse Rescue Mission

United States Bankruptcy Court for the:

Northern District of Texas, Dallas Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

| | Name of creditor and complete mailing address, including zip code | Name, telephone number, and email address of creditor contact | Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts) | Indicate if claim is contingent, unliquidated, or disputed | Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|---|--|---|---|--|--|---|-----------------|
| | | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| 1 | Atmos Energy PO Box 790311 Saint Louis, MO 63179 | Atmos Energy | Utilities | | | | \$701.35 |
| 2 | ATT c/o Bankruptcy 4331 Communications Dr Dallas, TX 75211 | ATT | Utilities | | | | \$421.16 |
| 3 | City of Grand Prairie Water Utilities PO Box 534045 Grand Prairie, TX 75053 | City of Grand Prairie Water Utilities | Utilities | | | | \$353.10 |
| 4 | Erwin, Danyelle 2801 Oak Rd Arlington, TX 76010 | Erwin, Danyelle | Unpaid wages | | | | \$1,200.00 |
| 5 | Green, Beverly 3132 Morning Meadow Lane Grand Prairie, TX 75052 | Green, Beverly | Unpaid wages | | | | \$1,200.00 |
| 6 | Green, Mae Elizabeth 509 Gilbert Rd Irving, TX 75061 | Green, Mae Elizabeth | Unpaid wages | | | | \$600.00 |
| 7 | Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19114 | Internal Revenue Service | Payroll taxes | | | | \$22,000.00 |
| 8 | Moore, LouKesha 6424 Melinda Dr Fort Worth, TX 76119 | Moore, LouKesha | Unpaid wages | | | | \$600.00 |

Debtor Lighthouse Rescue Mission
Name

Case number (if known) _____

| | Name of creditor and complete mailing address, including zip code | Name, telephone number, and email address of creditor contact | Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts) | Indicate if claim is contingent, unliquidated, or disputed | Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|----|---|---|---|--|--|---|-----------------|
| | | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| 9 | TXU Energy 6555 Sierra Dr, Irving, TX 75039 | TXU Energy | Utilities | | | | \$979.56 |
| 10 | | | | | | | |
| 11 | | | | | | | |
| 12 | | | | | | | |
| 13 | | | | | | | |
| 14 | | | | | | | |
| 15 | | | | | | | |
| 16 | | | | | | | |
| 17 | | | | | | | |
| 18 | | | | | | | |
| 19 | | | | | | | |
| 20 | | | | | | | |

B2030 (Form 2030)(12/15)

United States Bankruptcy Court
Northern District of Texas

In re

Lighthouse Rescue Mission

Debtor(s)

Case No. _____

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | |
|---|-------------------|
| For legal services, I have agreed to accept | <u>\$6,500.00</u> |
| Prior to the filing of this statement I have received | <u>\$6,500.00</u> |
| Balance Due | <u>\$0.00</u> |

2. The source of the compensation to be paid to me was:

☐ Debtor

☒ Other (specify) Beverly Green, Lucinda Crittendon

3. The source of compensation to be paid to me is:

☒ Debtor

☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/05/2019

Date

/s/ Sarah Melissa Cox

Signature of Attorney

Sarah Melissa Cox
Bar Number: 245475
Law Office of Sarah M. Cox, PLLC
12770 Coit Road 1100
Dallas, TX 75251
Phone: (214) 310-1321

Law Office of Sarah M. Cox, PLLC

Name of law firm

**IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

IN RE: **Lighthouse Rescue Mission**

CASE NO

CHAPTER 11

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 08/05/2019 Signature /s/ Lucretia Crittendon
Lucretia Crittendon, Vice-President

Atmos Energy
PO Box 790311
Saint Louis, MO 63179

ATT
c/o Bankruptcy
4331 Communications Dr Flr 4W
Dallas, TX 75211

City of Grand Prairie Water
Utilities
PO Box 534045
Grand Prairie, TX 75053

Dallas County Tax Assessor
Attn John R Ames
1201 Elm St 2600
Dallas, TX 75270

Danyelle Erwin
2801 Oak Rd Apt 5206
Arlington, TX 76010

GreCo Remodeling
1422 Beckway Dr
Arlington, TX 76018

Beverly Green
3132 Morning Meadow Lane
Grand Prairie, TX 75052

Lonnie Green
1805 Druid Ln
Fort Worth, TX 76112

Mae Elizabeth Green
509 Gilbert Rd
Irving, TX 75061

Timothy Green
509 Gilbert Rd
Irving, TX 75061

Internal Revenue Service
Centralized Insolvency Operations
PO Box 7346
Philadelphia, PA 19114

LouKesha Moore
6424 Melinda Dr
Fort Worth, TX 76119

Palmer Manuel
Campbell Centre I
8350 N. Central Expressway 1111
Dallas, TX 75206

States Resources Corp.
2211 S. 156th Circle
Omaha, NE 68130

TXU Energy
6555 Sierra Dr,
Irving, TX 75039

Fill in this information to identify the case:

Debtor name Lighthouse Rescue Mission

United States Bankruptcy Court for the:
Northern District of Texas, Dallas Division

Case number (if known): _____

☐ Check if this is an
amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206A-Summary)
- ☐ *Amended Schedule* _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/05/2019
MM/ DD/ YYYY


Signature of individual signing on behalf of debtor

Lucretia Crittendon
Printed name

Vice-President
Position or relationship to debtor